FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type	Responses)															
Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading Symbol Sevion Therapeutics, Inc. [SVON]						5. F	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title below) 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned						
4400 BISCAYNE BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 08/10/2017 4. If Amendment, Date Original Filed(Month/Day/Year) Table I - Non-Derivative Securities Acqui													
									X							
(City) (State) (Zip)									Acquired							
(Instr. 3) Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Y		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			(D) Ow Tra	Owned Following Reported			Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				(Wolldi/Day/Teal)		Code	e V	Amount (A) or (D) Price			,				(Instr. 4)	
Common St	ock		08/10/2017			C(1)	1	1,56	3,123	A	\$ 0.1 12	,080,139		D)	
Common St	cock		08/10/2017			C(2)	1	2,56	3,699	A	\$ 0.1 14	,643,838		D		
			Table II -			urities Acq	in th a cu uired, Di	is for rrent ispose	m are i y valid d of, or	not re I OMB Benef	quired to control r icially Ow	respond ur number.		on contained orm displays		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ersion Date Ercise (Month/Day/Year) a a of ative		4. 5. Nu Transaction Deriv Code Secur r) (Instr. 8) Acqu or Di of (D		Number of erivative ecurities equired (A) Disposed (D) astr. 3, 4,	umber of vative Expirate (Month isposed D) r. 3, 4,		, convertible securit Exercisable and ion Date //Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form of Derivati Security Direct (I or Indirect)	Ownersh (Instr. 4)
				Code	V (A	(D)	Date Exercis	able	Expirat Date	tion	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)
Convertible Promissory Note (3)	\$ 0.1	08/10/2017		C(1)		\$ 150,000	11/10/	2016	11/10/	/2017	Commor Stock	1,500,000	\$ 0	0	D	
Convertible Promissory	\$ 0.1	08/10/2017		C(2)		\$ 250,000	02/24/	2017	08/24/	/2017	Commor	2,500,000	\$ 0	0	D	

Reporting Owners

Donouting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Opko Health, Inc. 4400 BISCAYNE BLVD. MIAMI, FL 33137		X				

Signatures

Adam Logal, Chief Financial Officer	08/14/2017	
**Signature of Reporting Person	Date	

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Pursuant to the terms of the Convertible Note, the Reporting Person acquired (i) 1,500,000 shares of Common Stock upon conversion of \$150,000 in principal amount of the Convertible Note, and (ii) 63,123 shares of Common Stock in accrued and previously unpaid interest thereon (\$6,312.33).
- (2) Pursuant to the terms of the Convertible Note, the Reporting Person acquired (i) 2,500,000 shares of Common Stock upon conversion of \$250,000 in principal amount of the Convertible Note, and (ii) 63,699 shares of Common Stock in accrued and previously unpaid interest thereon (6,369.86).
- (3) The derivative security was previously subject to a "blocker" pursuant to which the reporting person was unable to convert the derivative security to the extent such conversion would result in the reporting person owning more than 4.99%.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.